

## Interview Summary

**Application No.**

10/729,803

**Applicant(s)**

AGARWAL ET AL.

**Examiner**

Michael Cuff

**Art Unit**

3627

All participants (applicant, applicant's representative, PTO personnel):

(1) Michael Cuff. (3) \_\_\_\_\_.

(2) Duane Moore. (4) \_\_\_\_\_.

Date of Interview: 06 December 2007.

Type: a) ☒ Telephonic b) ☐ Video Conference  
c) ☐ Personal (copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.  
If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: 13-17.

Identification of prior art discussed: None.

Agreement with respect to the claims f) ☒ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The non-final rejection mailed 10/09/07 recites the rejection of claims 1-12 while claims 1-17 are pending. It was agreed to send applicant a supplemental non-final action to correct the error. Claims 13-17 are addressed in the action so the correction will be merely replacing the "2" with a "7" per applicant's request.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

/Michael Cuff/  
Primary Examiner, Art Unit 3627  
Examiner's signature, if required

Examiner Note: You must sign this form unless it is an  
Attachment to a signed Office action.